## N18000007620

| (R                      | Requestor's Name    | )            |
|-------------------------|---------------------|--------------|
| (A                      | ddress)             |              |
| (A                      | ddress)             |              |
| (C                      | City/State/Zip/Phor | ne #)        |
| PICK-UP                 | ☐ WAIT              | MAIL         |
| (B                      | Business Entity Na  | ame)         |
| (C                      | Ocument Number      | r)           |
| Certified Copies        | Certificate         | es of Status |
| Special Instructions to | o Filing Officer:   |              |
|                         |                     |              |
|                         |                     |              |
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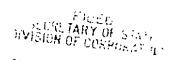
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations



2018 AUG -7 AM II: 60

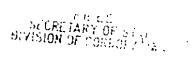
| MONTANA LOBO NAME OF CORPORATION:                             | ), INC  | .miil. Añ   |
|---|---|-------------|
| N18000007620  |   |             |
| DOCUMENT NUMBER:  |   |             |
| The enclosed Articles of Amendment and fee are sub-           | omitted for filing.   |             |
| Please return all correspondence concerning this matter       | ter to the following:   |             |
| LORI Y LADD   |   |             |
|   | (Name of Contact Person)  |             |
| MONTANA LOBO, INC   |   |             |
|   | (Firm/ Company)   |             |
| 1133 BAL HARBOR BLVD STE 1139-303                             |   |             |
|   | (Address)   |             |
| PUNTA GORDA, FL 33950   |   |             |
|   | (City/ State and Zip Code)  |             |
| LYLADD65@GMAIL.COM  |   |             |
| E-mail address: (to be used                                   | d for future annual report notification)  |             |
| For further information concerning this matter, please        | e call:   |             |
| LORI Y LADD   | 9415057744<br>at  |             |
| (Name of Contact Person                                       |   | one Number) |
| Enclosed is a check for the following amount made pa          | ayable to the Florida Department of State:  |             |
| ■ \$35 Filing Fee □\$43,75 Filing Fee & Certificate of Status | Certified Copy (Additional copy is enclosed)  \$\int \frac{1}{2}\$\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed) |             |

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



MONTANA LOBO INC

2818 AUG -7 AM 11: 68

| (Name of Corporation as   | currently filed with the Florid           | a Dept. of State)                       |
|---|---|---|
| N18000007620  |   |   |
| (Documer  | Number of Corporation (if kno             | wn)                                     |
| Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:    | a Statutes, this <i>Florida Not For I</i> | Profit Corporation adopts the following |
| A. If amending name, enter the new name of the co   | orporation:                               |   |
|   |   | The new                                 |
| name must be distinguishable and contain the word "c<br>"Company" or "Co." may not be used in the name. | corporation" or "incorporated"            | or the abbreviation "Corp." or "Inc."   |
| B. Enter new principal office address, if applicable  | N/A                                       |   |
| (Principal office address MUST BE A STREET ADI  |   |   |
|   |   |   |
|   |   |   |
| C. Enter new mailing address, if applicable:<br>(Mailing address <u>MAY BE A POST OFFICE BO</u>         | N/A                                       |   |
|   |   |   |
|   |   |   |
|   | -   |   |
| D. If amending the registered agent and/or registe  |   | nter the name of the                    |
| new registered agent and/or the new registered  |   |   |
| Name of New Registered Agent:   | /A  |   |
| N   | /A  |   |
| Van Barintan 1776 as Allenas  | (Flor                                     | ida street address)                     |
| <u>New Registered Office Address:</u>   |   |   |
|   |   | Florida                                 |
|   | (City)                                    | (Zip Code)                              |
| New Registered Agent's Signature, if changing Reg   | istered Agent:                            |   |
| I hereby accept the appointment as registered agent.  |   | e obligations of the position.          |
|   |   |   |
|   | 737 B                                     | 1.4                                     |
|   | Signature of New Register                 | rea Agent, if changing                  |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO - Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example:  X Change X Remove X Add | <u>V</u> <u>Mi</u> | hn Doe<br>ke Jones<br>Ily Smith |                       |
|-----------------------------------|--------------------|---------------------------------|-----------------------|
| Type of Action<br>(Check One)     | <u>Title</u>       | <u>Name</u>                     | <u>Addres</u> s       |
| 1) Change                         | VP                 | KEITH H. KUNKOWSKI              | 1133 BAL HARBOR BLVD  |
| Add                               |                    |                                 | STE, 1139-303         |
| X Remove                          |                    |                                 | PUNTA GORDA, FL 33950 |
| 2) Change                         | VP                 | DOROTHY G. LADD                 | 1133 BAL HARBOR BLVD  |
| X Add                             |                    |                                 | STE 1139-303          |
| Remove                            |                    |                                 | PUNTA GORDA, FL 33950 |
| 3 ) Change                        |                    |                                 |                       |
| Add                               |                    |                                 |                       |
| Remove                            |                    |                                 |                       |
| 4) Change                         |                    |                                 |                       |
| Add                               |                    |                                 |                       |
| Remove                            |                    |                                 |                       |
| 5) Change                         |                    |                                 |                       |
| Add                               |                    |                                 | <del></del>           |
| Remove                            |                    |                                 |                       |
| 6) Change                         |                    |                                 |                       |
| Add                               |                    |                                 |                       |
| Remove                            |                    |                                 | <u></u>               |

| E. If amending or adding additional Art<br>(attach additional sheets, if necessary). | (Be specific) |  |
|--|---------------|--|
| N/A  |               |  |
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| The   | JULY 31, 2018 late of each amendment(s) adoption:  | , if other than the   |
|-------|--|-----------------------|
|       | his document was signed.   | , ii otilei ulali ule |
| F ffo | AUGUST 1, 2018<br>tive date if applicable:   |                       |
| 1211  | (no more than 90 days after amendment file date)   |                       |
|       | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not nent's effective date on the Department of State's records.  | be listed as the      |
| Ado   | tion of Amendment(s) (CHECK ONE)   |                       |
|       | The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.   |                       |
|       | There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors  |                       |
|       | Dated JULY 31, 2018  |                       |
|       | Signature Ray Rudd   |                       |
|       | (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |                       |
|       | LORI Y. LADD   |                       |
|       | (Typed or printed name of person signing)  |                       |
|       | PRESIDENT  |                       |
|       | (Title of person signing)  |                       |